



Statewide Health Care Core Measure Set
Technical Work Group on Prevention Measures

Meeting #6: Wednesday, October 1, 2014

9:00 – 11:00 am

Meeting Summary

Agenda Item	Summary of Workgroup Activity and/or Action(s)
I. Welcome and Introductions	Susie Dade, Deputy Director of the Washington Health Alliance welcomed the group. Workgroup members introduced themselves. Meeting attendance is recorded on page four of this meeting summary. The slide deck for this meeting is available upon request; please contact Susie Dade at sdade@wahealthalliance.org
II. Follow-up Items from September 9, 2014 Meeting	<ul style="list-style-type: none"> • The workgroup reviewed the Population Health measures and, after considerable discussion, supported the straw model. Members made the following suggestions: <ul style="list-style-type: none"> ○ prioritize the population measures and potentially limit the number of measures (e.g., 10 measures); ○ if possible, line up the directionality of the global health measures (i.e., it would be better if they are all either positive or negative); however, it was noted that the proposed measures align with Results WA and we want to stay aligned; ○ if possible, aggregate CAHPS health plan results for tobacco measure to produce a statewide result (in addition to health plan results); ○ consider adding the CMS tobacco measure to the high priority development list for addition once the measure is finalized and in use by CMS; and ○ recommend annual fielding of the Healthy Youth Survey (instead of bi-annually). • The workgroup reviewed the obstetric measures and determined that: <ul style="list-style-type: none"> ○ Measure #101, the Prenatal/ Postpartum measure should be excluded from the list given the lack of readily available data (claims not generated under OB global fee) and timing of eligibility/enrollment problematic, particularly for Medicaid population; ○ The workgroup expressed support for the two low birth weight measures and would like the Acute workgroup to review the measures and assess them for their data availability and feasibility; given the number of measures already being recommended, this may go on the list for future consideration; ○ The workgroup agreed to include the Unintended Pregnancies measures as a global population measure, with data available at the county and state levels only.

	<ul style="list-style-type: none"> • The workgroup assessed the BMI measures and decided to add four measures (pending prioritization of population measures): <ul style="list-style-type: none"> ○ Weight Assessment and Counseling for Nutrition and Physical Activity for Children/ Adolescents (measurable at the health plan level and state level only) ○ Percentage of adolescents with a healthy weight (population measures collected through the Healthy Youth Survey) ○ Adult BMI assessment (measurable at the health plan level and state level only) ○ Percentage of adults with a normal weight (BMI 18.5 – 24.9) (population measure collected bi-annually through the Behavioral Risk Factor Surveillance System (BRFSS))
III. Action on measures recommended by non-workgroup members:	<ul style="list-style-type: none"> • The workgroup considered Newborn screening NQF #1354 requested by Debra Doyle, DOH and decided to exclude the measure from the starter list. • The workgroup considered and decided to include the CDC's HIV screening measure requested by Cheri Levenson, DOH.
IV. Measure Review Process	See results from discussions to date starting on page five of this meeting summary.
V. Feedback on Cost Measures Proposal	In the interest of time, Susie requested that the members of the workgroup review the proposal and submit comments no later than 5 pm Thursday, October 2.
VI. Determine unit(s) of analysis for each YES measure	The workgroup reviewed the straw model detailing the units of analysis. The results of this discussion are included in the tables starting on page five of this meeting summary.
VII. Review Scoring Criteria for each YES measures	The workgroup began but did not have time to complete a detailed review of the scoring for each YES measure. Staff will send a final draft to the members of the workgroup for review and comment.

VIII. Next steps and wrap-up	<p>In preparation for the October 15th meeting, the following follow-up work will be completed:</p> <ul style="list-style-type: none"> i. Members will complete two surveys designed to help prioritize the following groups of measures: <ul style="list-style-type: none"> 1. the population health measures; and 2. the high priority development (parking lot) measures. ii. The workgroup will refer two low birth weight measures (measure #219 and 235) to Acute Care workgroup to assess based on coding and feasibility of data. iii. Staff will refine the population health graphic to incorporate suggestions made by the workgroup. iv. Staff will finalize a draft of the scoring and circulate for review. <p>Email any feedback to Kate Bazinsky at kbazinsky@bailit-health.com. The next workgroup meeting is on Wednesday, October 15, 2014, from 9:00 – 11:00 am.</p>
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October 1, 2014 Attendance/Committee members:

Committee Member	Organization	ATTENDED in Person	ATTENDED by Phone	DID NOT ATTEND
Jennifer Allen	Planned Parenthood Votes Northwest		X	
Joan Brewster	Grays Harbor Public Health & Social Services		X	
Ian Colbridge	WA State Hospital Association			X
Beverly Green	Group Health Research Institute		X	
Jeffrey Harris	UW Health Promotion Research Center	X		
Jesus Hernandez	Community Choice			X
Dan Kent	Premiera Blue Cross	X		
Mark Koday	Yakima Valley Farmworkers Clinic	X		
Mary Kay O'Neill	Regence Blue Shield			X
Janet Piehl	UW Neighborhood Clinics	X		
Bailey Raiz	Community Health Plan of Washington		X	
Kyle Unland	Spokane Regional Health District		X	
Kristen Wendorf	Seattle King County Public Health			X

Attendance/Staff:

Name	Organization
Susie Dade	Washington Health Alliance
Teresa Litton	Washington Health Alliance
Laura Pennington	WA State Health Care Authority
Kate Bazinsky	Bailit Healthcare Purchasing (by phone)

Attendance by Phone/Other (Public):

Jody Daniels, GlaxoSmithKline
 Cheri Levinson, Washington State Department of Health
 Lena Nachand, Health Care Authority
 Ginny Weir, Bree Collaborative

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The following measures have been reviewed by the workgroup and considered **YES**. This list is a running tally of decisions made to date. (n=23)

Identifier (#)	Name of Measure	NQF #	Steward	Category	Data Source	Measure Description	Comments
22	Cervical Cancer Screening	0032	NCQA	Adult Screening(s)	Claims	Percentage of women 21-64 years of age who received PAP test to screen for cervical cancer. (interval every 3 years)	Unit of analysis: state, county or ACH, health plan, medical group Strong endorsement from workgroup Actionable Disparities in care a challenge Interest in seeing the future iteration of this measure also including HPV (in addition to PAP)
25	Chlamydia Screening	0033	NCQA	Adult Screening(s)	Claims	Percentage of women ages 16 to 20 that were identified as sexually active and had at least one test for Chlamydia during the measurement year	Unit of analysis: state, county or ACH, health plan, medical group Strong endorsement from workgroup Lack of prevention results in significant morbidity (not mortality) Actionable Disparities in care a challenge
252	Breast Cancer Screening	NA	NCQA	Adult Screening(s)	Claims	The percentage of women 50–74 years of age who had a mammogram to screen for breast cancer. (interval = 1x/27 months)	Unit of analysis: state, county or ACH, health plan, medical group Utilize the HEDIS 2015 Breast Cancer screening measure specifications
28	Colorectal Cancer Screening (COL)	0034	NCQA	Adult Screening(s)	Claims	Percentage of adults 50-75 years of age who had appropriate screening for colorectal cancer.	Unit of analysis: state, county or ACH, health plan For the starter set, conduct as a claims-only measure. Note: if the state is interested in having national benchmarks for this claims-based measure, then it will need to provide the resources to purchase this information from NCQA. Two members dissented from the majority opinion to approve the measure. Need to move to hybrid measure, incorporating clinical data when possible.

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The following measures have been reviewed by the workgroup and considered **YES**. This list is a running tally of decisions made to date. (n=23)

Identifier (#)	Name of Measure	NQF #	Steward	Category	Data Source	Measure Description	Comments
122	Well-Child Visits in the 3rd, 4th, 5th, and 6th Years of Life (W34)	1516	NCQA	Childhood: early and adolescent well-care	Claims	Percentage of children ages 3 to 6 that had one or more well-child visits with a PCP during the measurement year	Unit of analysis: state, county or ACH, health plan In the absence of good data for school-based immunizations, the workgroup recommends including this measure for well-child visits as a proxy to keep a focus on school-based immunizations.
23	Child and Adolescent Access to Primary Care Practitioners (CAP)	NA	NCQA	Childhood: early and adolescent well-care	Claims	Percentage of children and adolescents ages 12 months to 19 years that had a visit with a PCP, including four separate percentages: Children ages 12 to 24 months and 25 months to 6 years who had a visit with a PCP during the measurement year Children ages 7 to 11 years and adolescents ages 12 to 19 years who had a visit with a PCP during the measurement year or the year prior to the measurement year	Unit of analysis: state, county or ACH, health plan The group is feels it is a priority to monitor access to primary care for children, particularly given the large expansion of this population through Medicaid and the Exchange.
24	Childhood Immunization Status (CIS)	0038	NCQA	Immunizations	WA IIS	Percentage of children that turned 2 years old during the measurement year and had specific vaccines by their second birthday	Unit of analysis: state, county or ACH, health plan Can measure at the school and county but not the provider level. Strong work group support.
2	Adolescent Immunization Status	1407	NCQA	Immunizations	WA IIS	Percentage of adolescents that turned 13 years old during the measurement year and had specific vaccines by their 13 th birthday	Unit of analysis: state, county or ACH, health plan See comment for # 24

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The following measures have been reviewed by the workgroup and considered **YES**. This list is a running tally of decisions made to date. (n=23)

Identifier (#)	Name of Measure	NQF #	Steward	Category	Data Source	Measure Description	Comments
222	Human Papillomavirus (HPV) Vaccine for Female Adolescents (and males)	1959	NCQA	Immunizations	WA IIS	Percentage of female adolescents 13 years of age who had three doses of the human papillomavirus (HPV) vaccine by their 13th birthday.	Unit of analysis: state, county or ACH, health plan Modify the measure to include males (but following the same specifications otherwise). The workgroup recognizes that the NCQA benchmarks would not be applicable to this measure. Stratify the data to examine females and males separately.
143	Influenza Immunization	0041	AMA-PCPI	Immunizations	WA IIS	Percentage of patients aged 6 months and older seen for a visit between October 1 and March 31 who received an influenza immunization OR who reported previous receipt of an influenza immunization	Unit of analysis: state, county or ACH Use the Washington Immunization Information System (IIS) as the source for the measure. Concern about the extent to which the IIS captures complete data for this measure. IIS staff report that the data is getting more complete, and if the measure is included on the list, then providers may focus more on reporting the data. See comment for # 24
180	Pneumonia Vaccination Status for Older Adults (PNU)	0043	NCQA	Immunizations	WA IIS	Percentage of patients 65 years of age and older who have ever received a pneumococcal vaccine.	Unit of analysis: state, county or ACH, health plan This is mostly a Medicare measure. Workgroup would like to consider the use of data collected from the Washington Immunization Information System (IIS). Concern about the extent to which the IIS captures complete data for this measure. IIS staff report that the data is getting more complete, and if the measure is included on the list, then providers may focus more on reporting the data.

October 1, 2014

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Identifier (#)	Name of Measure	NQF #	Steward	Category	Data Source	Measure Description	Comments
124	Medical Assistance With Smoking and Tobacco Use Cessation (MSC)	0027	NCQA	Tobacco Cessation	CAHPS Survey	Assesses different facets of providing medical assistance with smoking and tobacco use cessation: Advising Smokers and Tobacco Users to Quit Discussing Cessation Medications Discussing Cessation Strategies	Unit of analysis: state, health plan The workgroup recommended that the state provide resources to ensure that the CG-CAHPS survey is continued and expanded statewide.
121	Weight Assessment and Counseling for Nutrition and Physical Activity for Children/ Adolescents: Body Mass Index Assessment for Children/ Adolescents (WCC)	0024	NCQA	Nutrition/ Physical Activity/ Obesity	Claims and Clinical Data	Percentage of children ages 3 to 17 that had an outpatient visit with a primary care practitioner (PCP) or obstetrical/gynecological (OB/GYN) practitioner and whose weight is classified based on body mass index percentile for age and gender	Unit of analysis: state, health plan
5	Adult BMI Assessment (ABA)	NA	NCQA	Nutrition/ Physical Activity/ Obesity	Claims and Clinical Data	The percentage of members 18 to 74 years of age who had an outpatient visit and whose body mass index (BMI) was documented during the measurement year or the year prior to the measurement year.	Unit of analysis: state, health plan

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The following measures have been reviewed by the workgroup and considered **YES**. This list is a running tally of decisions made to date. (n=23)

Identifier (#)	Name of Measure	NQF #	Steward	Category	Data Source	Measure Description	Comments
157	Primary Caries Prevention Intervention as Part of Well/Ill Child Care as Offered by Primary Care Medical Providers	1419	University of Minnesota	Oral Health	Claims	The measure will a) track the extent to which the PCMP or clinic (determined by the provider number used for billing) applies FV as part of the EPSDT examination and b) track the degree to which each billing entity's use of the EPSDT with FV codes increases from year to year	Unit of analysis: state, (county or ACH?), health plan Recommended: MU stage two, B level rec of USPHSTF, opportunity for improvement, also in Physician Quality program, supported by Delta dental (will provide claims data) Medicaid will also provide data. Will need to work specifically on data aggregation and determine how to operationalize this measure. <u>System not now in place.</u>
4	Adult Access to Preventive/ Ambulatory Health Services (AAP)	NA	NCQA	Utilization	Claims	The percentage of members 20 to 44 years, 45 to 64 years, and 65 years and older who had an ambulatory or preventive care visit.	Unit of analysis: state, county or ACH, health plan Easy measure to implement. Important given the expansion activities that are currently ongoing.
293	Screening for HIV	NA	CDC	HIV	Claims or Clinical Data	Number of patients in the denominator who had at least one HIV test performed during a routine exam or medical visit in an outpatient/ambulatory care setting with a nurse practitioner, physician, and/or physician assistant. Denominator Statement: Number of patients between the ages of 15-65 seen by a primary health care provider over a 12 month period.	Unit of analysis: state, county or ACH, health plan, medical group

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Identifier (#)	Name of Measure	NQF #	Steward	Category	Data Source	Measure Description	Comments
282	Unintended pregnancies	NA	NA	Obstetrics	CDC Pregnancy Risk Assessment Monitoring System (PRAMS)	Percent of pregnancies that were unintended at time of conception. This does have a data source through the CDC Pregnancy Risk Assessment Monitoring System (PRAMS), which is collected by Department of Health at the state level.	Unit of analysis: state, county or ACH Population health measure.
284	Adult obesity: % of adults with a healthy weight	NA	BRFSS	Nutrition/ Physical Activity/ Obesity	Survey	The percentage of adults with a BMI of 18.5 – 24.9. The BMI is collected through the Behavioral Risk Factor Surveillance System (BRFSS).	Unit of analysis: state, county or ACH Population health measure. This measure is a component of Results WA. Goal = Increase from 36% (2011) to 38% (2017).
285	Youth obesity: the percentage of adolescents with a healthy weight	NA	Healthy Youth Survey	Nutrition/ Physical Activity/ Obesity	Survey, AskHYS.net	The percentage of students 10 th graders with a healthy weight.	Unit of analysis: state, county or ACH Population health measure. Survey only conducted every other year. This measure is a component of Results WA. Goal = Increase from 75% to 76% (2016).
383	Percentage of adults reporting fair or poor health	NA	BRFSS	Population Health	Survey	Numerator: # of adults age 18 and older who answer “fair” or “poor” in response to the question, “would you say your health in general is excellent, very good, good, fair or poor?” Denominator: # of adults age 18 and older who answer this question	Unit of analysis: state, county or ACH Population health measure.

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Identifier (#)	Name of Measure	NQF #	Steward	Category	Data Source	Measure Description	Comments
384	Percentage of adults reporting 14 or more days of poor mental health	NA	BRFSS	Population Health	Survey	Numerator: # of adults ages 18 and older who answer "14 or more days" in response to the question, "Now thinking about your mental health, which includes stress, depression, and problems with emotions, for how many days during the past 30 days was your mental health not good?" Denominator: # of adults age 18 and older who answer this question	Unit of analysis: state, county or ACH Population health measure. WA Department of Health, Behavioral Risk Factor Surveillance System; can be benchmarked to national data via the Centers for Disease Control
385	Percentage of adults who smoke cigarettes	NA	BRFSS	Tobacco Cessation/Population Health	Survey	Numerator: # of adults ages 18 and older who answer "every day" or "some days" in response to the question, "Do you now smoke cigarettes every day, some days, or not at all?" Denominator: # of adults age 18 and older who answer this question.	Unit of analysis: state, county or ACH WA Department of Health, Behavioral Risk Factor Surveillance System; can be benchmarked to national data via the Centers for Disease Control. This measure is a component of Results WA. Goal = Decrease from 17% (2011) to 15% (2017).

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The following measures have been reviewed by the workgroup and referred to the Acute Care workgroup for additional consideration.

Identifier (#)	Name of Measure	NQF #	Steward	Category	Data Source	Measure Description	Comments
219	Live Births Weighing Less Than 2,500 Grams	1382	CDC	Obstetrics	Claims	Percentage of live births that weighed less than 2,500 grams in the state during the reporting period	Referred to the Acute workgroup
235	Low Birth Weight Rate (PQI 9)	0278	AHRQ	Obstetrics	Claims	Low birth weight (< 2,500 grams) infants per 1,000 newborns. Excludes transfers from other institutions.	Referred to the Acute workgroup

October 1, 2014-- The following measures have been reviewed by the workgroup and considered **NO**. **These measures will be excluded from further consideration:**

Identifier (#)	Name of Measure	NQF #	Steward	Sub Domain	Data Source	Measure Description	Comments
21	Breast Cancer Screening (No longer NQF endorsed)	0031	NCQA	Adult Screening(s)	Claims	The percentage of women 40–74 years of age who had a mammogram to screen for breast cancer. (2013 HEDIS specifications)	
51	Glaucoma Screening in Older Adults	NA		Adult Screening(s)	Claims	The percentage of Medicare members 65 years and older who received a glaucoma eye exam by an eye care professional for early identification of glaucomatous conditions.	
233	Depression Screening By 18 Years of Age	1515	NCQA	Behavioral Health/ Depression	Clinical Data	The percentage of adolescents 18 years of age who had a screening for depression using a standardized tool.	

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Identifier (#)	Name of Measure	NQF #	Steward	Sub Domain	Data Source	Measure Description	Comments
141	Developmental Screening In the First Three Years of Life	1448	NCQA	Childhood: early and adolescent	Claims (Depending on state)	The percentage of children screened for risk of developmental, behavioral and social delays using a standardized screening tool in the first three years of life. This is a measure of screening in the first three years of life that includes three, age-specific indicators assessing whether children are screened by 12 months of age, by 24 months of age and by 36 months of age.	
231	Number of School Days Children Miss Due to Illness	0717	Child and Adolescent Health Measurement Initiative on behalf of the Maternal and Child Health Bureau	Childhood: early and adolescent	Patient Reported Data/Survey	Measures the quantitative number of days of school missed due to illness or condition among children and adolescents age 6-17 years.	See comment for #229
229	Children Who Live in Communities Perceived as Safe	720	Child and Adolescent Health Measurement Initiative on behalf of the Maternal and Child Health Bureau	Childhood: early and adolescent	Patient Reported Data/Survey	This measure ascertains the parents' perceived safety of child's community or neighborhood.	Workgroup felt that these types of measures are not appropriate for the starter set. Want to have a conversation within the workgroup regarding working towards future inclusion of measures that pertain to community/public health

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Identifier (#)	Name of Measure	NQF #	Steward	Sub Domain	Data Source	Measure Description	Comments
237	Measure of Medical Home for Children and Adolescents	0724	Child and Adolescent Health Measurement Initiative on behalf of the Maternal and Child Health Bureau	Childhood: early and adolescent	Patient Reported Data/Survey	This composite measure assesses whether or not children and adolescents (age 0-17 years) receive health care within a medical home according to the survey respondent (almost always the child's parent).	
230	Children Who Receive Preventive Medical Visits	1332	Maternal and Child Health Bureau, Health Resources & Services Administration	Childhood: early and adolescent	Patient Reported Data/Survey	Assesses how many medical preventive visits in a 12 month period, such as a physical exam or well-child check-up	
239	Standardized Universal Developmental Screening	NA	unknown	Childhood: early and adolescent	unknown	unknown	Did not identify a specific measure.
164	Adverse Childhood Trauma measure with TBD specifications	NA	Homegrown	Childhood: early and adolescent	Clinical Data		Did not specify a specific measure. Workgroup felt that the issue should be placed on the list for future consideration.
125	Lead Screening in Children (LSC)	NA	NCQA	Childhood: early and adolescent	Claims and Clinical Data	The percentage of children two years of age who had one or more capillary or venous lead blood tests for lead poisoning by their second birthday.	Universal lead screening is not recommended in WA. This measure is inconsistent with state guidelines.

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Identifier (#)	Name of Measure	NQF #	Steward	Sub Domain	Data Source	Measure Description	Comments
123	Well-Child Visits in the First 15 Months of Life (W15)	1392	NCQA	Childhood: early and adolescent well-care	Claims	Percentage of children that turned 15 months old during the measurement year and had zero, one, two, three, four, five, or six or more well-child visits with a PCP during their first 15 months of life	If we are trying to get children to meet with providers, we accomplish that goal with the inclusion of the immunization measures.
3	Adolescent Well- Care Visit (AWC)	NA	NCQA	Childhood: early and adolescent well-care	Claims (claims and clinical data for Medicaid Plans)	Percentage of adolescents ages 12 to 21 that had at least one comprehensive well-care visit with a PCP or an OB/GYN practitioner during the measurement year	If we are trying to get children to meet with providers, we accomplish that goal with the inclusion of the immunization measures.
262	Preventive services: percentage of enrolled members age less than or equal to 18 years who are up-to-date for all appropriate preventive services (combination 2).	NA	HealthPartners	Childhood: early and adolescent well-care	Clinical data	Percentage of enrolled members age less than or equal to 18 years who are up-to-date for all appropriate preventive services (combination 2) based on age and gender. #2)	
263	Preventive services: percentage of enrolled members age less than or equal to 18 years who are up-to-date for all appropriate preventive services (combination 3).	NA	HealthPartners	Childhood: early and adolescent well-care	Clinical data	Percentage of enrolled members age less than or equal to 18 years who are up-to-date for all appropriate preventive services (combination 3) based on age and gender.	

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Identifier (#)	Name of Measure	NQF #	Steward	Sub Domain	Data Source	Measure Description	Comments
264	Percentage of enrolled members age less than or equal to 18 years who are up-to-date for all appropriate preventive services (combination 4).	NA	HealthPartners	Childhood: early and adolescent well-care	Clinical data	Combination 2 plus tobacco assessment	
265	Percentage of enrolled members age less than or equal to 18 years who are up-to-date for all appropriate preventive services (combination 5).	NA	HealthPartners	Childhood: early and adolescent well-care	Clinical data	Combination 3 plus tobacco assessment	
238	Developmental screening using a parent completed screening tool (Parent report, Children 0-5)	1385	Maternal and Child Health Bureau, Health Resources & Services Administration	Childhood: early and adolescent: Developmental Screening	Patient Reported Data/Survey	whether the parent or caregiver completed a developmental screening tool meant to identify children at-risk for developmental, behavioral and social delays.	
239	Standardized Universal Developmental Screening	NA	unknown	Childhood: early and adolescent: Developmental Screening	unknown	unknown	Did not identify a specific measure.
188	Paired Measure Hepatitis C: Hepatitis B Vaccination with high risk chronic conditions	NA	unknown	Immunizations	unknown	NA	Did not identify a specific measure.
152	Influenza Vaccination Coverage Among Healthcare Personnel	0431	CMS	Immunizations	Clinical Data or Facility Records	Percentage of healthcare personnel (HCP) who receive the influenza vaccination.	No current access to data to measure.

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Identifier (#)	Name of Measure	NQF #	Steward	Sub Domain	Data Source	Measure Description	Comments
253	Percentage of children with 3rd birthday during the measurement year with appropriate immunizations	NA	Uniform Data System	Immunizations	clinical data	Percentage of children who were fully immunized on or before their 3rd birthday. A child is fully immunized if he/she has been vaccinated or there is documented evidence of contraindication for the vaccine or history of illness for ALL of the following: 4 DTP/DTaP, 3 IPV, 1 MMR, 3 Hib, 3 HepB, 1VZV (Varicella), and 4 Pneumococcal conjugate vaccines prior to or on their 3rd birthday	
261	Percentage of patients who by age 13 years were up-to-date with recommended adolescent immunizations: 1) one HPV – human papillomavirus vaccine by age 13, 2) one MCV4 – meningococcal, 3) one Tdap – tetanus, diphtheria toxoids and acellular pertussis vaccine, and 4) one influenza vaccine within the last year.	NA	Institute for Clinical Systems Improvement	Immunizations	Clinical data	This measure is used to assess the percentage of patients who by age 13 years were up-to-date with recommended adolescent immunizations: <ul style="list-style-type: none"> •One HPV – human papillomavirus vaccine by age 13 •One MCV4 – meningococcal •One Tdap – tetanus, diphtheria toxoids and acellular pertussis vaccine •One influenza vaccine within the last year 	

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Identifier (#)	Name of Measure	NQF #	Steward	Sub Domain	Data Source	Measure Description	Comments
48	Flu Shots for Adults Ages 50–64	0039	NCQA	Immunizations	Survey	Rolling average represents the percentage of Medicaid enrollees ages 50 to 64 that received an influenza vaccination between September 1 of the measurement year and the date when the CAHPS 5.0H survey was completed	
H-35	IMM-1a: Pneumococcal Immunization (PPV23) – Overall Rate	1653	CMS	Immunizations	Clinical Data	Inpatients age 65 years and older and 5-64 years of age who have a high risk condition who are screened for Pneumococcal Vaccine status and vaccinated prior to discharge if indicated.	
H-36	IMM-2: Influenza Immunization	1659	CMS	Immunizations	Clinical Data	Inpatients age 6 months and older discharged during October, November, December, January, February or March who are screened for influenza vaccine status and vaccinated prior to discharge if indicated.	
234	Children Age 6-17 Years who Engage in Weekly Physical Activity	1348	Maternal and Child Health Bureau, HRSA	Nutrition/ Physical Activity/ Obesity	Patient Reported Data/Survey	Measures how many times per week child 6-17 years exercises vigorously	

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Identifier (#)	Name of Measure	NQF #	Steward	Sub Domain	Data Source	Measure Description	Comments
6	Adult Body Mass Index (BMI) Assessment	0421	CMS	Nutrition/ Physical Activity/ Obesity	Clinical Data	Percentage of patients aged 18 years and older with a documented BMI during the current encounter or during the previous six months AND when the BMI is outside of normal parameters, a follow-up plan is documented during the encounter or during the previous six months of the encounter.	
148	Participated in enough Aerobic and Muscle Strengthening exercise to meet guidelines	NA	Behavioral Risk Factor Surveillance System (BRFSS)	Nutrition/ Physical Activity/ Obesity	Survey	Participated in enough Aerobic and Muscle Strengthening exercise to meet guidelines	
149	Median intake of fruits and vegetables (times per day)	NA	Behavioral Risk Factor Surveillance System (BRFSS)	Nutrition/ Physical Activity/ Obesity	Survey	Median intake of fruits and vegetables (times per day)	
160	Adult BMI Screening measure with TBD specifications (Waist Circumference)	NA	Homegrown	Nutrition/ Physical Activity/ Obesity	Clinical Data		
161	Nutrition measure with TBD specifications	NA	Homegrown	Nutrition/ Physical Activity/ Obesity	Clinical Data		
162	Physical activity measure with TBD specifications	NA	Homegrown	Nutrition/ Physical Activity/ Obesity	Clinical Data		

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Identifier (#)	Name of Measure	NQF #	Steward	Sub Domain	Data Source	Measure Description	Comments
47	Falls: Screening, Risk-Assessment, and Plan of Care to Prevent Future Falls	0101	NCQA	Safety/ Accident Prevention	Claims	This is a clinical process measure that assesses falls prevention in older adults. The measure has three rates: A) Screening for Future Fall Risk: B) Falls: Risk Assessment: months C) Plan of Care for Falls:	
137	Tobacco Use Assessment	NA	Washington State Defined	Tobacco Cessation	NA	The percentage of members who had an outpatient visit and who had a tobacco use assessment during the measurement year or the year prior to the measurement year	
158	Tobacco Use: Screening and Cessation Intervention	0028	AMA-PCPI	Tobacco Cessation	Claims and Clinical Data	Percentage of patients aged 18 years and older who were screened for tobacco use one or more times within 24 months AND who received cessation counseling intervention if identified as a tobacco user	
163	Tobacco use measure with TBD specifications	NA	Homegrown	Tobacco Cessation	Clinical Data		

October 1, 2014-- The following measures have been reviewed by the workgroup and considered **NO**. These measures will be excluded from further consideration:

Identifier (#)	Name of Measure	NQF #	Steward	Sub Domain	Data Source	Measure Description	Comments
257	Substance Use Disorders: Screening for Depression Among Patients with Substance Abuse or Dependence	NA	CMS	Drug and Alcohol Use	Claims or Registry	Percentage of patients aged 18 years and older with a diagnosis of current substance abuse or dependence who were screened for depression within the 12-month reporting period	Referred by the Chronic work group. Workgroup preferred to take a universal approach to depression screening and focus on Screening for Clinical Depression and Follow-Up Plan (NQF 418) (See measure #156).
259	Adult depression in primary care: percentage of patients with cardiovascular disease with documentation of screening for major depression or persistent depressive disorder using PHQ-2.	NA	Institute for Clinical Systems Improvement	Behavioral Health/ Depression	Electronic health/medical record	This measure is used to assess the percentage of patients 18 years and older with cardiovascular disease with documentation of screening for major depression or persistent depressive disorder using Patient Health Questionnaire-2 (PHQ-2).	Same comment as for #257 above.
260	Adult depression in primary care: percentage of patients with type 2 diabetes with documentation of screening for major depression or persistent depressive disorder using PHQ-2.	NA	Institute for Clinical Systems Improvement	Behavioral Health/ Depression	Electronic health/medical record	This measure is used to assess the percentage of patients 18 years and older with type 2 diabetes with documentation of screening for major depression or persistent depressive disorder using Patient Health Questionnaire-2 (PHQ-2).	Same comment as for #257 above.
283	Percent of women consistently using a birth control method.	NA	NA	Obstetrics	unknown	Percent of women consistently using a birth control method.	No specific measure identified.

October 1, 2014-- The following measures have been reviewed by the workgroup and considered **NO**. **These measures will be excluded from further consideration:**

Identifier (#)	Name of Measure	NQF #	Steward	Sub Domain	Data Source	Measure Description	Comments
155	Children Who Received Preventive Dental Care	1334	Maternal and Child Health Bureau, Health Resources & Services Administration	Oral Health	Survey	Percentage of children who had one or more preventive dental visits in the past 12 months.	
154	Children Who Have Dental Decay or Cavities	1335	Maternal and Child Health Bureau, Health Resources & Services Administration	Oral Health	Survey	Assesses if children age 1-17 years have had tooth decay or cavities in the past 6 months	
223	Annual Dental Visits (ADV)	1388	NCQA	Oral Health	Claims	Percentage of patients 2-21 years of age who had at least one dental visit during the measurement year. This measure applies only if dental care is a covered benefit in the organization's Medicaid contract.	
240	Sealants in 6 – 9 years	NA	Dental Quality Alliance	Oral Health	Claims	Percentage of a. enrolled children b. enrolled children who received at least one [dental/oral health] service in the age category of 6-9 years at "elevated" risk (e.g. "moderate" or "high") who received a sealant on a permanent first molar tooth within the reporting year	

October 1, 2014-- The following measures have been reviewed by the workgroup and considered **NO**. These measures will be excluded from further consideration:

Identifier (#)	Name of Measure	NQF #	Steward	Sub Domain	Data Source	Measure Description	Comments
241	Sealants in 10 – 14 years	NA	Dental Quality Alliance	Oral Health	Claims	Percentage of a. enrolled children b. enrolled children who received at least one [dental/oral health] service in the age category of 10-14 years at “elevated” risk (e.g. “moderate” or “high”) who received a sealant on a permanent second molar tooth within the reporting year.	
242	Topical Fluoride Intensity for Children at Elevated Caries Risk	NA	Dental Quality Alliance	Oral Health	Claims	Percentage of a. all enrolled children b. enrolled children who received at least one dental service who are at “elevated” risk (i.e. “moderate” or “high”) who received (1, 2, 3, >4) topical fluoride applications within the reporting year.	
243	Preventive Services for Children at Elevated Caries Risk	NA	Dental Quality Alliance	Oral Health	Claims	Percentage of a. all enrolled children b. enrolled children who received at least one dental service who are at “elevated” risk (i.e., “moderate” or “high”) who received a topical fluoride application and/or sealants within the reporting year.	

October 1, 2014-- The following measures have been reviewed by the workgroup and considered **NO**. **These measures will be excluded from further consideration:**

Identifier (#)	Name of Measure	NQF #	Steward	Sub Domain	Data Source	Measure Description	Comments
270	Examinations and Oral Health Examinations	NA	unknown	Oral Health	Claims	The Examinations and Oral Health Evaluations measure estimates the percentage of children who: § received a comprehensive or periodic oral health evaluation or, § for children under 3 years of age, those who received an oral evaluation and counseling with the primary care giver in the measurement year.	
271	Preventive Dental Services (PDS).	NA	California Managed Risk Medical Insurance Board (MRMIB)	Oral Health	Claims	The Preventive Dental Services measure estimates the percentage of children that received any preventive dental service in the measurement year. These services include teeth cleaning, topical fluoride application, nutritional counseling or oral hygiene instruction.	

October 1, 2014-- The following measures have been reviewed by the workgroup and considered **NO**. **These measures will be excluded from further consideration:**

Identifier (#)	Name of Measure	NQF #	Steward	Sub Domain	Data Source	Measure Description	Comments
272	Continuity of Care (COC).	NA	California Managed Risk Medical Insurance Board (MRMIB)	Oral Health	Claims	The Continuity of Care measure estimates the percentage of children who were enrolled in the same plan for two years with no gap in coverage and received a comprehensive oral evaluation or a prophylaxis in the year prior to the measurement year and in the measurement year.	
273	Filling to Preventive Services Ratio (FPSR).	NA	California Managed Risk Medical Insurance Board (MRMIB)	Oral Health	Claims	The Filling to Preventive Services Ratio measure estimates the percentage of children who had one or more fillings in the past year and who received a topical fluoride or sealant application in the measurement year, preventive services that are recommended for children at high risk of caries.	
274	Use of Dental Treatment Services (UDTS)	NA	California Managed Risk Medical Insurance Board (MRMIB)	Oral Health	Claims	The Utilization of Dental Treatment Services measure estimates the percentage of children who received any dental treatment service, other than diagnostic or preventive services, in the measurement year.	

October 1, 2014-- The following measures have been reviewed by the workgroup and considered **NO**. **These measures will be excluded from further consideration:**

Identifier (#)	Name of Measure	NQF #	Steward	Sub Domain	Data Source	Measure Description	Comments
275	Treatment/Prevention of Caries (TPC)	NA	California Managed Risk Medical Insurance Board (MRMIB)	Oral Health	Claims	Measure includes subscribers enrolled for at least 11 of the past 12 months of 2012 (denominator) who received a treatment for caries (D2000-D2999) or a caries preventive procedure (D1203, D1204, D1206, D1310, D1330, or D1351) in 2012 (numerator).	
276	Overall Utilization of Dental Services (OUDS)	NA	California Managed Risk Medical Insurance Board (MRMIB)	Oral Health	Claims	Measure includes subscribers continuously enrolled in the same plan in 2009, 2010, 2011 and 2012 (denominator) who received any dental service (D0100-D999), including preventive services, during 2009, 2010, 2011 and 2012 (numerator).	
277	Access to Regular Dentist	NA	CAHPS	Oral Health	Survey	Dental Consumer Assessment of Healthcare Providers and Systems (D-CAHPS): The survey section Your Child's Regular Dentist defines a regular dentist as one "your child would go to for check-ups and cleanings, or when your child has a cavity or tooth pain."	

October 1, 2014-- The following measures have been reviewed by the workgroup and considered **NO**. **These measures will be excluded from further consideration:**

Identifier (#)	Name of Measure	NQF #	Steward	Sub Domain	Data Source	Measure Description	Comments
278	Rating of Child's Regular Dentist	NA	CAHPS	Oral Health	Survey	Dental Consumer Assessment of Healthcare Providers and Systems (D-CAHPS): Families reporting that their child had a regular dentist were asked to rate their child's dentist on a scale of 0-10, "where 0 is the worst rating possible and 10 is the best rating possible."	
279	Rating of Child's Dental Plan	NA	CAHPS	Oral Health	Survey	Dental Consumer Assessment of Healthcare Providers and Systems (D-CAHPS): The survey section Your Child's Dental Plan asks the parent to rate their child's dental plan on a scale of 0-10, "where 0 is the worst dental plan possible and 10 is the best dental plan possible."	
280	Overall Condition of Child's Teeth and Gums	NA	CAHPS	Oral Health	Survey	Dental Consumer Assessment of Healthcare Providers and Systems (D-CAHPS): The survey section About Your Child begins by asking parents, "In general, how would you rate the overall condition of your child's teeth and gums?"	

October 1, 2014-- The following measures have been reviewed by the workgroup and considered **NO**. **These measures will be excluded from further consideration:**

Identifier (#)	Name of Measure	NQF #	Steward	Sub Domain	Data Source	Measure Description	Comments
281	Reason For Not Visiting the Dentist	NA	CAHPS	Oral Health	Survey	Dental Consumer Assessment of Healthcare Providers and Systems (D-CAHPS: why parents did not take their child to the dentist if they responded that they had not visited a dentist in the past year.	
287	Current cigarette use: Students in 6th, 8th, 10th and 12th grade	NA	Healthy Youth Survey	Tobacco Cessation	Survey	Percentage of 6th, 8th, 10th and 12th graders who answer any days to the question "During the past 30 days, on how many days did you: smoke cigarettes?"	
288	Current smokeless tobacco use: Students in 6th, 8th, 10th and 12th grade	NA	Healthy Youth Survey	Tobacco Cessation	Survey	Percentage of 6th, 8th, 10th and 12th graders who answer any days to the question "During the past 30 days, on how many days did you: use chewing tobacco, snuff, or dip?"	
289	Current cigar use: Students in 6th, 8th, 10th and 12th grade	NA	Healthy Youth Survey	Tobacco Cessation	Survey	Percentage of 6th, 8th, 10th and 12th graders who answer any days to the question "During the past 30 days, on how many days did you: smoke cigars, cigarillos, or little cigars?"	

October 1, 2014-- The following measures have been reviewed by the workgroup and considered **NO**. These measures will be excluded from further consideration:

Identifier (#)	Name of Measure	NQF #	Steward	Sub Domain	Data Source	Measure Description	Comments
290	Current candy flavored tobacco use: Students in 6th, 8th, 10th and 12th grade	NA	Healthy Youth Survey	Tobacco Cessation	Survey	Percentage of 6th, 8th, 10th and 12th graders who answer any days to the question "Not including menthols: During the past 30 days on how many days did you use tobacco that tastes like candy, fruit or alcohol (tobacco includes: little cigars, bidis, cloves, chew, spit, snus, hookah?)"	
291	Relationship between Poor Grades and Cigarette Smoking: Students in 6th, 8th, 10th and 12th grade	NA	Healthy Youth Survey	Tobacco Cessation	Survey	Percentage of 6th, 8th, 10th and 12th graders who are getting "Mostly C's, D's or F's and if they were "smoker" or if they "non-smoker".	
144	Intimate Partner Violence Screening	NA	Washington Pregnancy Risk Assessment Monitoring System (PRAMS)	Safety/ Accident Prevention	Survey	"During any of your prenatal care visits, did a doctor, nurse or other health care worker ask if someone was hurting you physically or emotionally?"	
159	Breastfeeding – Initiation and duration measure with TBD specifications	NA	Homegrown	Obstetrics	Clinical Data		

101	Prenatal & Postpartum Care (PPC)	1517	NCQA	Obstetrics	Claims and Clinical Data	The percentage of deliveries of live births between November 6 of the year prior to the measurement year and November 5 of the measurement year. For these women, the measure assesses the following facets of prenatal and postpartum care.	
297	Hearing screening prior to hospital discharge	1354	CDC	Hearing Screening	Clinical Data	This measure assesses the proportion of births that have been screened for hearing loss before hospital discharge.	
298	Audiological Evaluation no later than 3 months of age (EHDI-3)	1360	CDC	Hearing Screening	Clinical Data	This measure assesses the percentage of newborns who did not pass hearing screening and have an audiological evaluation no later than 3 months of age.	
299	Newborn Hearing Screening	1402	CDC	Hearing Screening	Clinical Data	The percentage of children 6 months of age who had documentation of a review of their newborn hearing screening results by their 3- month birthday.	

October 1, 2014—The following topics/measures have been excluded from further consideration for the initial list of recommended of measures (“the starter kit”). However, they have been placed on a “parking lot” list which will be shared with the Performance Measurement Committee along with the initial list of recommended measures. This list reflects topics and/or specific measures that are considered very important for additional consideration and inclusion at a future date, dependent upon (1) the availability one or more nationally vetted measures that are relevant for to a broad cross section of the population, and (2) data that is readily available to enable measurement and reporting at the medical group, hospital, health plan and/or geographic (county) level. This list should be considered draft and will be revisited before final submission to the Performance Measurement Committee.

Topic	Comments	Potential Measures
1. Risky Behavior Assessment or Counseling	The workgroup would like to see the risk assessment or counseling for alcohol, tobacco, and other substance use separated from the risk assessment or counseling for sexual activity.	Risky Behavior Assessment or Counseling by Age 18 Years (NQF# 1507) (see measure #146)
2. Mental/ Behavioral Health- depression screening	Availability of data to enable measurement/reporting problematic; The workgroup felt strongly that a depression screening measure should be added at a later date.	Screening for Clinical Depression and Follow-Up Plan (NQF 418) (See measure #156) Maternal Depression Screening (NQF 1401) (See measure #153)
3. Adverse Childhood Trauma measure	Availability of a standard measure/ available data to assess adverse childhood trauma is problematic. Workgroup felt this is an important issue.	No specific measure identified
4. School-based immunization	Workgroup would like to capture information about immunizations for children ages 2-13. The Office of Immunization and Child Profile is currently working on an initiative to link existing Immunization Information System (IIS) patient records of school-aged children to their school and grade to have a direct measure of the immunization status of all students.	No specific measure identified
5. Domestic Violence	May want to include on a future measure set as one of the global population measures	BRFSS: Percentage of individuals that reported experiencing domestic violence during their lifetimes (by gender)
6. Breast Feeding		NQF # 0480, PC-05, Assesses the number of newborns exclusively fed breast milk during the newborn’s entire hospitalization